PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application of	or	Docket	Number
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0	9/12706	7
		_

CLAIMS			
I'I AINAC			
	43 FII	C / - C	

(Column 1) (Column 2) **TOTAL CLAIMS FOR** NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS minus 20= INDEPENDENT CLAIMS minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT

SMALL	ENTITY
TVDE	

OTHER THAN OR SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	

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	·ΔIMS	$\Delta S I$	MH-NI)	1-13 -	PAKII

) C	L'AIMS AS A	MENDEL) - PART II	
/ T		(Column 1)	4 4 5	(Column 2)	(Column 3)
AMENDMENT AK		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
MON	Total	· 8	Minus	-20	=
ME	Independent		Minus	.63	-
A	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT CLAIM	

:		OTHER THAN
SMALL ENTITY	OR	SMALL ENTITY

RATE ADDI-TIONAL FEE RATE ADDI-TIONAL FEE X\$ 9= OR X\$18= X40= OR X80= +135= OR +270= TOTAL ADDIT. FEE OR TOTAL OR					
X40= OR X80= OR +270= TOTAL OR TOTAL	RATE	TIONAL		RATE	TIONAL
+135= OR +270= TOTAL OR TOTAL	X\$ 9=		OR	X\$18=	
+135= OR +270= TOTAL OR TOTAL	X40=		OR	X80=	
	+135=	" ,	OR		
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
ΣQ	Total	*	Minus	**	=
ME	Independent	*	Minus	***	=
⋖	FIRST PRESE	NTATION OF MI	JI TIPLE DEF	PENDENT CLAIM	

	X40=		OR	X80=	. (Beg
	+135=	*	OR	+270=		st A
•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	1				- .	
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	able
	X\$ 9= :	e.	OR	X\$18=		C
	X40=	1 21	OR	X80=		Ò
	+135=	- ' '	OR	+270=		ρy
•	TOTAL ADDIT FEE		OR	TOTAL ADDIT, FEE	*	

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		(Column 1)		(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
δ	Total	•	Minus	**	=
W	independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

RATE	ADDI- TIONAL FEE		-	ADDI- TIONAL FEE
X\$ 9=	i -ı	OR	X\$18=*	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE	Salt stre	OR	TOTAL ADDIT. FEE	

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL

ADDIT. FEE

OR

ADDIT. FEE

TOTAL

OR

ADDIT. FEE

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE

OR

ADDIT. FEE

ADDIT. FEE

TOTAL

ADDIT. FEE

ADDIT. FEE

TOTAL

ADDIT. FEE

^{*} If the difference in column 1 is less than zero, enter "0" in column 2

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN SMALL ENTITY** (Column 1) (Column 2) TYPE | OR **FOR** NUMBER FILED **NUMBER EXTRA RATE** FEE RATE FEE **BASIC FEE** 395.00 790.00 OR **TOTAL CLAIMS** minus 20 = x\$22= x\$11 =OR INDEPENDENT CLAIMS minus 3 = x41 =x82 =OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR If the difference in column 1 is less than zero, enter "0" in column 2 190. **TOTAL TOTAL** OR **CLAIMS AS AMENDED - PART II OTHER THAN** (Column 1) (Column 2) (Column 3) OR **SMALL ENTITY SMALL ENTITY CLAIMS** HIGHEST ⋖ REMAINING ADDI-ADDI-**PRESENT NUMBER AMENDMENT AFTER** RATE **TIONAL** RATE **PREVIOUSLY EXTRA** TIONAL **AMENDMENT** FEE PAID FOR FEE Total Minus x\$22= x\$11=OR Independent Minus = x41 =x82 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST **REMAINING** ADDI-ADDI-**PRESENT** NUMBER RATE TIONAL RATE **TIONAL AFTER PREVIOUSLY EXTRA** EZ **AMENDMENT** FEE **FEE** PAID FOR AMENDM Total Minus x\$22=x\$11=OR Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +135= +270= TOTAL **TOTAL** OR ADDIT FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-O REMAINING **PRESENT** NUMBER RATE TIONAL **RATE** TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR Total Minus x\$22=x\$11=OR *** Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +135= +270= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

FORM PTO-875 (Rev. 8/97)